IN THE UNITED STATES PATENT AND TRADEMARK OFFICE REQUEST FOR FILING APPLICATION UNDER 37 C.F.R. 1.53(b) THOUT FILING FEE AND/OR WITHOUT EXECUTED INVENTOR'S DECLARATION

Mail Stop Patent Application

Atty. Dkt. 4209-26

Commissioner for Patents

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Alexandria, VA 22313-1450

Date: April 2, 2004

This is a request for filing a new PATENT APPLICATION under Rule 53(b) entitled:

PIEZOELECTRIC DEVICES AND METHODS AND CIRCUITS FOR DRIVING SAME

without a filing fee and/or without an executed inventor's oath/declaration. This application is made by the below identified inventor(s). Attached hereto are the following papers: Newly executed Declaration, ☐ Copy of Declaration from prior application, ☒ Abstract Please delete the following inventors in the continuation/division/continuation-in-part application: Deleted persons: pages of specification and claims (including 70 numbered claims), and sheets of accompanying drawing/s for Figures 1-2, 3, 3A-3D, 3E(1)-3E(2), 3F, 3G, 3H(1)-3H(2), 3I(1)[3I(3), 3J, 4D, 5A-5D, 6A-6G, 7A-7D, 8A-8D, 9A-9B, 10A-10B, 11A-11B, 12-14, 15A-15B, 16, 17A-17D, 18A-18B, 19 and 20A-										
	Attached is a Power o	f Attorney. ned under 35 U.S.C. §		following foreign applic						
	hereby incorporated by reference in this application. This application is a continuation/continuation-in-part of Application No., filed, the entire content of which is hereby incorporated by reference in this application. Petition filed in prior application to extend its life to insure co-pendency. The prior application is assigned to the prior application is assigned to the prior application is assigned to the examiner consider the art cited in the above parent application(s) by applicant and/or the Examiner for the reasons stated therein. A listing of that art is attached, but pursuant to Rule 98(d) copies are not required. Applicant claims "small entity" status. "Small entity" statement attached. Please enter the attached preliminary amendment prior to calculation of filing fee:									
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3.	Inventor:	Sanford	•	JONES	United States			
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	Mailing Address:	, _ ,						
	(Zip Code)							
NOTE	E: FOR ADDITIONAL INV	ENTORS, check box	t 🔲 and attach shee	t with same information an	d signature and date for each.			